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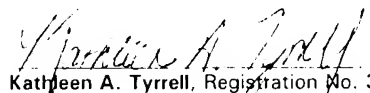
JUN 11 2002

TECH CENTER 1600/2900

Attorney Docket No.: DEX-0245
Inventors: Recipon et al.
Serial No.: 10/034,934
Filing Date: October 26, 2001
Examiner: Not yet assigned
Group Art Unit: 1633
Title: Compositions And Methods Relating To Lung
Specific Genes And Proteins

I, Kathleen A. Tyrrell, Registration No. 38,350, certify that this correspondence is being deposited with the U.S. Postal Service as First Class mail in an envelope addressed to the U.S. Patent and Trademark Office, P.O. Box 2327, Arlington, VA 22202.

On this date: May 29, 2002


Kathleen A. Tyrrell, Registration No. 38,350

U.S. Patent and Trademark Office
Box Fee Amendment, P.O. Box 2327
Arlington, VA 22202

Dear Sir:

PRELIMINARY AMENDMENT

Please enter the following amendment and remarks into the record:

In the specification:

Please replace the paragraph at page 1, lines 4-7, as follows:

--This application claims the benefit of priority from U.S.
Provisional Application Serial No. 60/243,461 filed October 26,

Adjustment date: 07/02/2002 MMARMOL
07/12/2002 MPASASO 00000009 10034934
01 FC:104 -280.00 OP

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AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Recipon et al.

Docket No.

DEX-0245

Serial No.
10/034,934

Filing Date
October 26, 2001

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1633

Inventor(s) Compositions and Methods Relating To Lung Specific Genes and Proteins

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TO THE ASSISTANT COMMISSIONER FOR PATENTS

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Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input checked="" type="checkbox"/>					\$280.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$280.00

See attached USPTO Credit Card Payment Form

- ☐ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619
A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: May 29, 2002

Kathleen A. Tyrrell, Registration No. 38,350

LICATA & TYRRELL P.C.
66 East Main Street
Marlton, N.J. 08053
Tel: 856-810-1515
Fax: 856-810-1454

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CC: